## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 451 939

## Total Fee Calculation

|                         | Fee Code | Total<br># Claims | Number<br>Extra | x | Fee        | Fee        | 31 | Total   |
|-------------------------|----------|-------------------|-----------------|---|------------|------------|----|---------|
|                         | Sm./Lg.  |                   |                 |   | Sm. Entity | Lg. Entity |    |         |
| Basic Filing Fee        | 201/101  |                   |                 |   |            |            | -  | 760.60  |
| Total Claims >20        | 203/103  | <u>118</u> -20 -  | 98              | x |            |            | =  | 1764.00 |
| Independent Claims >3   | 202/102  | 19 .3 -           | 16              | x |            |            | 3  | 1248.00 |
| Mult. Dep Claim Present | 204/104  |                   |                 |   |            | ·          | 3  | 260.00  |
| Surcharge               | 205/105  | •                 |                 |   |            | -          | =  | 130.60  |
| English Translation     | 139      |                   |                 |   |            |            |    |         |

## TOTAL FEE CALCULATION

Fees due upon filing the application:

| Total Filing Fees Due =    | 5 4162 °° |
|----------------------------|-----------|
| Less Filing Fees Submitted | - \$      |
|                            |           |

BALANCE DUE = \$ 4162 a

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Office of Initial Paychi Examination